iQ Retirement

Russell Investments

Change Pension Payment Details Form

Use this form to change your pension payments. Print clearly in BLOCK LETTERS.

1. Member details

a. Title (please select)

Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Dr ☐ Other ☐ >

b. Surname

c. First name(s)

d. Date of birth (DD MM YYYY)

e. Member number

f. If you have more than one Pension Account, you must identify the Pension Account to which your instructions on this form apply.

☐ I have one Pension Account. Please apply my instructions on this form to that account.

☐ I have more than one Pension Account.
Please apply the instructions on this form to the account number:

2. Pension payments

☐ Monthly payments

I previously elected monthly payments and I would like my future payments for this year to be updated so I receive

☐ **The** minimum payment for the year. This may cancel any future payments for this financial year.

☐ Specific dollar amounts $. 00

☐ Quarterly payments

I previously elected quarterly payments and I would like my June payments for this year to be updated so I receive

☐ **The** minimum payment for the year. This may cancel any future payments for this financial year.

☐ Specific dollar amounts $. 00

☐ Semi - annual payments

I previously elected semi-annual payments and I would like my June payments for this year to be updated so I receive

☐ **The** minimum payment for the year

☐ Specific dollar amounts $. 00

IN PREPARING THIS FORM THE TRUSTEE HAS NOT TAKEN INTO ACCOUNT THE INVESTMENT OBJECTIVES, FINANCIAL SITUATION AND PARTICULAR NEEDS (FINANCIAL CIRCUMSTANCES) OF ANY PERSON. ACCORDINGLY, BEFORE ACTING ON ANY ADVICE, YOU SHOULD ASSESS WHETHER THE ADVICE IS APPROPRIATE IN LIGHT OF YOUR OWN FINANCIAL CIRCUMSTANCES. TOTAL RISK MANAGEMENT PTY LIMITED ABN 62 008 644 353, AFSL NO. 238790, TRUSTEE OF THE RUSSELL INVESTMENTS MASTER TRUST ABN 89 384 753 567.

2. Pension payments (continued)

Annual payments

I previously elected annual payments in June and I would like my payments for this year to be updated so I receive

The minimum payment for the year

Specific dollar amounts $. 00

3. Authorisation

If you have a financial adviser it is important that you consult them prior to effecting changes to your account. If you have consulted your adviser regarding this change or you would like to proceed with this request without speaking with your adviser please sign, date and return this form to us.

If signed under Power of Attorney, the attorney verifies that no notice of revocation of power has been received.

Member name

Member signature

Date (DD MM YYYY)

Please return this form to:

iQ Retirement by Russell Investments
Locked Bag A4094
Sydney South NSW 1235

You can also contact us as follows:

Toll free on **1800 555 667**
Operating hours are from Monday to Friday, 9am – 5pm (AEST)

iq@russellinvestments.com.au

russellinvestments.com.au/retirement

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